

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	<b>10/731,571</b>
	<b>Filing Date</b>	<b>December 9, 2003</b>
	<b>First Named Inventor</b>	<b>David L. Henrickson</b>
	<b>Group Art Unit</b>	<b>3624</b>
	<b>Confirmation Number</b>	<b>5084</b>
	<b>Examiner Name</b>	<b>Thomas L. Mansfield</b>
<input type="checkbox"/> Sent via Express Mail Label No.:	<b>Attorney Docket Number</b>	<b>317071.01</b>

ENCLOSURES (check all that apply)										
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply (10 pages) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement with Form PTO/SB/08A ( pages) <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> A copy of the Notice to File Missing Parts Under 37 CFR 1.52 or 1.5	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) ( sheets) <input type="checkbox"/> Declaration <input type="checkbox"/> Newly Executed ( pages) <input type="checkbox"/> A copy from a prior application (37 CFR 1.63(d)) ( pages) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> General Power of Attorney (SB80) <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Other Enclosure(s) (please identify below): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>								
CERTIFICATE OF MAILING OR TRANSMISSION (Under 37 CFR § 1.8(a))  I hereby certify that this correspondence is being electronically deposited with the USPTO via EFS-Web on the date shown below:  <table> <tr> <td><u>February 13, 2009</u></td> <td><u>/Noemi Tovar/</u></td> </tr> <tr> <td>Date</td> <td>Signature</td> </tr> <tr> <td></td> <td><u>Noemi Tovar</u></td> </tr> <tr> <td></td> <td>Printed Name</td> </tr> </table>			<u>February 13, 2009</u>	<u>/Noemi Tovar/</u>	Date	Signature		<u>Noemi Tovar</u>		Printed Name
<u>February 13, 2009</u>	<u>/Noemi Tovar/</u>									
Date	Signature									
	<u>Noemi Tovar</u>									
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Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required, or credit any overpayments, to Deposit Account No. 50-0463 for the above identified patent application.										

SIGNATURE OF ATTORNEY OR AGENT					
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